DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

HEALTHY HOMES
DEMONSTRATION PROGRAM

Funding Availability for the Healthy Homes Demonstration Program PROGRAM OVERVIEW

Purpose of the Program. The purpose of the Healthy Homes Demonstration Program is to develop, demonstrate and promote cost-effective, preventive measures to correct multiple safety and health hazards in the home environment that produce serious diseases and injuries in children of low-income families. HUD is interested in reducing health threats to the maximum number of residents, especially children, in a cost efficient manner.

Available Funds. Approximately \$5 million in Fiscal Year 2003 funds.

Eligible Applicants. Not-for-profit institutions, and for-profit firms located in the U.S., Native American Tribes, State and local governments, and federally recognized Indian Tribes are eligible to apply. For-profit firms are not allowed to include a fee in the cost proposal (i.e., no profit can be made from the project). Federal agencies and federal employees are not eligible to apply for this program.

Application Due Date: June 10, 2003. Match. None required.

Additional Information

I. Application Due Date and Technical Assistance

If you are interested in applying for funding under this program, please carefully review the General Section of this SuperNOFA and the following additional information.

Application Due Date. You must submit a completed application to HUD on or before the respective program's application due date. The application due date for all programs contained in this NOFA is July 9, 2003.

Application Submission Procedures. See the General Section of this SuperNOFA for specific procedures concerning the form of application submission (e.g., mailed applications, express mail or overnight delivery). Be advised that there is no Application Kit. All of the information required for submitting an application is contained in this NOFA.

Addresses. You must submit a complete application to, Department of Housing and Urban Development, Office of Healthy Homes and Lead Hazard Control, ATTN: Healthy Homes Demonstration Program, 451 Seventh Street, SW, Room P3206, Washington, DC 20410.

For Further Information and Technical Assistance. You may contact Ellen R. Taylor, Director, Healthy Homes Division, Office of Healthy Homes and Lead Hazard Control, at the address above; telephone (202) 755–1785, extension 116 (this is not a toll-free number). If you are hearing-or speech-impaired, you may reach the above telephone number via TTY by calling the toll-free Federal Information Relay Service at 1–800–877–8339.

II. Authority, Funding Amounts, And Amount Of Funds Allocated

- (A) Authority. The authority for this program is Sections 501 and 502 of the Housing and Urban Development Act of 1970 and the Consolidated Appropriations Resolution of 2003, Public Law 108–7, approved February 20, 2003.
- (B) Funding Available and Eligibility. Approximately \$5 million in Fiscal Year 2003 will be available for the Healthy Homes Demonstration Program Grants will be awarded on a competitive basis following evaluation of all proposals according to the rating factors described in the General Section of this SuperNOFA. HUD anticipates that approximately six to eight grants will be awarded, ranging from approximately \$250,000 to approximately \$1,000,000 each. A minimum score of 75 is required for award consideration.

III. Eligible Applicants and Activities

(A) Program Description

(1) Background. The Healthy Homes Demonstration Program is a part of HUD's Healthy Homes Initiative (HHI). The HHI departs from the more traditional approach of attempting to correct one hazard at a time (e.g., asbestos, radon). In April 1999, HUD submitted to Congress a preliminary plan containing a full description of the HHI. This description (Summary and Full Report) is available on the HUD website at www.hud.gov.

The HHI builds upon HUD's existing housing-related health and safety issues, including lead hazard control, building structural safety, electrical safety, and fire protection to address multiple childhood diseases and injuries, such as asthma, mold-induced illness, carbon monoxide poisoning, and other conditions, related to housing in a more coordinated fashion. A coordinated effort is feasible because a limited number of building deficiencies contribute to many hazards. Substantial savings are possible using this approach, because separate visits to a home by an inspector, public health nurse, or outreach worker can add significant costs to efforts to eliminate hazards. A description of the HHI program, and a link to its website, are available at www.hud.gov.

In addition to deficiencies in basic housing facilities that may impact health, changes in the U.S. housing stock and more sophisticated epidemiological methods and biomedical research have led to the identification of new and often more subtle health hazards in the residential environment. While such hazards will tend to be found disproportionately in housing that is substandard (e.g., structural problems, lack of adequate heat, etc.), such housing-related environmental hazards may also exist in housing that is otherwise of good quality. Appendix A of this NOFA briefly describes the housing-associated health and injury hazards HUD considers key targets for intervention. Appendix D lists references that serve as the basis for the information provided in the Healthy Homes Demonstration Program.

HUD is interested in promoting approaches that are cost-effective and efficient and that result in the reduction of health threats for the maximum number of residents for the long run, and, in particular, for children in low-income families. Section II of the General Section of the SuperNOFA presents Policy Priorities. The overall goals and objectives of the HHI are to:

(a) Mobilize public and private resources, involving cooperation among all levels of government, the private sector, and faith-based and other community-based organizations to develop the most promising, costeffective methods for identifying and controlling housing-based hazards;

controlling housing-based hazards; (b) Build local capacity to operate sustainable programs that will prevent and control housing-based hazards in low- and very low-income residences when HUD funding is exhausted; and

(c) Affirmatively further fair housing and environmental justice.

(2) Healthy Homes Demonstration Activities. Through the Healthy Homes Demonstration program, HUD will initiate competitive projects to promote implementation of available risk reduction techniques for the control of key hazards described in Appendix A. HUD will award demonstration projects that implement housing assessment, maintenance, renovation and construction techniques to identify and correct housing-related illness and injury risk factors, and disseminate healthy homes information and replicate successful interventions.

HUD will evaluate proposals based on the elements described below. Applicants are required to be specific as to the locations where they are targeting their intervention activities to occur, the residents, individuals, or groups targeted to receive interventions, and the organizations targeted to continue to operate effective intervention strategies over the life of the award and thereafter.

The objectives of the Healthy Homes Demonstration program include:

- (a) Identification of target areas and homes where assessment and interventions will occur;
- (b) Identification and evaluation of effective methods of hazard abatement and risk reduction;
- (c) Development of appropriatelyscaled, flexible, cost-effective and efficient intervention strategies that take into account the range of conditions likely to be encountered in housing and that maximize the number of housing units that receive an intervention;

(d) Development of methodologies for evaluating intervention effectiveness;

(e) Development of local capacity in target areas and training programs for target groups to operate sustainable programs to prevent and control housing-based hazards, especially in low- and very low-income residences;

(f) Development of a cost-effective protocol for identifying homes that are candidates for interventions, identifying hazards in these homes, and screening out homes where structural or other condition factors (e.g., cost) make interventions infeasible or impractical;

(g) Development and delivery of public outreach programs that provide information about effective methods for preventing housing-related childhood diseases and injuries and for promoting the use of these interventions;

(h) Targeting, through education and outreach, specific high-risk communities and other identified audiences such as homeowners, landlords, health care deliverers, pregnant women, children, residential construction contractors, maintenance personnel, housing inspectors, real estate professionals, home buyers, and low-income minority families;

(i) Implementation of media strategies to use print, radio and television to increase public awareness of housing-related hazards that threaten children, including the use of minority media, nonprofit organizations that work with persons with disabilities, and advocates for racial and ethnic minorities, and faith-based organizations;

(j) Dissemination of existing tools and, as needed, new tools to inform parents and caregivers about housing-related hazards and enable them to take prompt corrective action; and

(k) Development of training programs for Healthy Homes activities to emphasize assessment and intervention methods applicable to public and private housing in the target area. (B) Eligible Applicants

Not-for-profit institutions, including faith-based and community-based organizations, and for-profit firms located in the U.S., state and local governments, and federally recognized Indian Tribes are eligible to apply. For-profit firms are not allowed to include a fee in the cost proposal (*i.e.*, no profit can be made from the project). Federal agencies and federal employees are not eligible to apply for this program.

(C) Eligible Activities

The following direct activities and support activities are eligible under this grant program.

- (1) Direct Project Elements. These include activities that you may undertake directly, or through subrecipients, such as:
- (a) Performing evaluations of eligible housing to determine the presence of housing-based hazards (e.g., mold growth, allergens, unvented appliances, exposed steam pipes or radiators, deteriorated lead-based paint) through the use of generally accepted testing procedures.
- (b) Conducting housing interventions to remediate existing housing-based hazards and address conditions that could result in their recurrence. Any lead hazard evaluation and control work shall be conducted by persons qualified for the activities according to 24 CFR part 35, especially sections 35.1325 for abatement and 35.1330 for interim controls. Qualified persons must possess certification as abatement contractors, risk assessors, inspectors, abatement workers, or sampling technicians, or otherwise having been trained in a HUD-approved course in lead-safe work practices. You may refer to the HUD Guidelines for the Evaluation and Control of Lead-Based Paint Hazards in Housing (Guidelines) for additional information. The Guidelines and/or applicable regulations may be downloaded from the Office of Healthy Homes and Lead Hazard Control's homepage, linked to HUD's website at www.hud.gov. All pest control activities shall incorporate the principles and methods of integrated pest management (IPM). In technical terms, IPM is the coordinated use of pest and environmental information with available pest control methods to prevent unacceptable levels of pest damage by the most economical means and with the least possible hazard to people, property, and the environment. One information source is the University of Minnesota's electronic textbook of Integrated Pest Management,

available at http://ipmworld.umn.edu/textbook.htm.)

(c) Undertaking housing rehabilitation activities that are specifically required to carry out effective control of housing-based hazards, and without which the intervention could not be completed and maintained. Funds under this program may also be used to control lead-based paint hazards; however, such controls may not be a principal focus of the grant. Lead hazard control activities are carried out under HUD's Lead-Based Paint Hazard Control Grant Program.

(d) Carrying out relocation of families and individuals, when necessary, during the period in which intervention is conducted and until the time the affected unit receives clearance for reoccupancy. Residents relocated must be guaranteed the choice of returning to the unit after the intervention.

(e) If medical examinations of young children for conditions caused or exacerbated by exposure to hazards are demonstrated to be critical to the outcome of your project, and there are no alternative sources to cover these costs, conducting such examinations.

(f) Environmental sampling and medical testing recommended by a physician or applicable occupational or public health agency to protect the health of the intervention workers, supervisors, and contractors, unless reimbursable from another source.

- (g) Conducting testing and analysis for lead, mold, carbon monoxide and/or other toxins as appropriate, with respect to generally accepted standards or criteria, or where not available, other appropriate levels justified in conjunction with the project. Clearance dust samples related to lead-based paint must be analyzed by a laboratory recognized by the Environmental Protection Agency's (EPA's) National Lead Laboratory Accreditation Program (NLLAP). All tests results related to lead-based paint must be provided to the owner of the unit, together with a notice describing the owner's legal duty to disclose the results to tenants and buyers.
- (h) Carrying out architectural, engineering and work specification development and other construction management services to control housing-based hazards and remediate existing hazards.

(i) Providing training on Healthy Homes practices to homeowners, renters, painters, remodelers, and housing maintenance staff working in low-or very low-income housing.

(j) Providing cleaning supplies for hazard intervention and hazard control to faith-based and other communitybased organizations for use by homeowners and tenants in low-income housing, or to such homeowners and tenants directly. (See Section II of the General Section of the SuperNOFA for more information about faith-based and other community-based organizations.)

- (k) Conducting general or targeted community education programs on environmental health and safety hazards. This activity would include training on Healthy Homes maintenance and renovation practices, among other topics. It would also include making materials available, upon request, in alternative formats for persons with disabilities (e.g., Braille, audio, large type), and in languages other than English that are common in the community, whenever possible.
- (l) Securing liability insurance for hazard evaluation and control activities to be performed. This activity is not an administrative activity.
- (m) Supporting data collection, analysis, and evaluation of project activities. As a condition of the receipt of financial assistance under this NOFA all successful applicants will be required to cooperate with all HUD staff and contractors performing HUD funded research and evaluation studies. Maintaining a registry of housing units in which housing-based hazards were not found during evaluation, and those in which such problems have been controlled.
- (n) Preparing quarterly progress reports and an overall final grant report detailing activities (e.g., number of units tested, hazards found, types of interventions provided, evaluation of the most cost-efficient methodologies by type of unit), findings, and recommended future actions for cost-effective interventions at the conclusion of grant activities.

(2) Support Elements

- (a) Your administrative costs. There is a 10 percent maximum allowance for administrative costs. Specific information about administrative costs is included in Appendix F of this NOFA.
- (b) Program planning and management costs of sub-grantees and other sub-recipients.
- (D) Ineligible Activities
- (1) Purchase of Real Property
- (2) Purchase or lease of equipment having a per unit cost in excess of \$5,000, unless prior written approval is obtained from HUD.
- (3) Medical treatment costs, except as specified in Section III (C)(1)(e) above.

IV. Requirements

In addition to requirements listed in the General Section of the SuperNOFA, you, the applicant, must comply with the requirements listed below:

(A) Threshold Requirements

As an applicant, you must meet all of the threshold requirements Section V (B) of the General Section of the SuperNOFA. Threshold requirements include Ineligible Applicants, Compliance with Fair Housing and Civil Rights Laws, Conducting Business in Accordance with Core Values and Ethical Standards, Delinquent Federal Debts and Pre-Award Accounting System Surveys. Information about threshold requirements is provided in Section (V)(B) of the General Section of the SuperNOFA. These requirements include the requirement to affirmatively further fair housing (AFFH) in accordance with paragraph V(D) of the General Section of the SuperNOFA. Applications that meet all of the threshold requirements will be eligible to be scored and ranked based on the total number of points allocated for each of the rating factors described below. Your application must receive a total score of at least 75 points to be considered for funding. Applications will not be rated or ranked if they do not meet the threshold requirements of the General Section of the SuperNOFA.

(B) Program Requirements

- (1) Work Activities. All lead hazard control activities must be conducted in compliance with the applicable requirements of HUD's Lead-Safe Housing Rule, 24 CFR part 35, and as clarified in HUD's Interpretive Guidance about this rule. Activities must also comply with any additional requirements in effect under a State or Native American Tribal Lead-Based Paint Training and Certification Program that has been authorized by the EPA pursuant to 40 CFR 745.320.
 - (2) Budgeting.
- (a) Matching Requirement. You are not required to provide a matching contribution in the Healthy Homes Demonstration Program.
- (b) Administrative Costs. There is a 10 percent maximum allowance for administrative costs as specified in Section 1011(j) of the Residential Lead-Based Paint Hazard Reduction Act of 1992 (Title X of the Housing and Community Development Act of 1992, Public Law 102–550). Additional information about allowable administrative costs is provided in Appendix F of this NOFA.

- (3) Period of Performance. The period of performance cannot exceed 36 months from the time of the award.
- (4) Program Performance. Grantees shall take all reasonable steps to accomplish all healthy homes activities within the approved period of performance. HUD will closely monitor the grantee's performance with particular attention to completion of specified activities, deliverables and milestones, and number of units proposed to be assessed or receive interventions within the approved period of performance. HUD reserves the right to terminate the grant prior to the expiration of the period of performance if the grantee fails to meet 25 percent of the milestones, including all deliverables, as scheduled in their work plan.
- (5) Certified and Trained Providers. Lead hazard control activities must be conducted by persons qualified for the activities according to 24 CFR part 35 (possessing certification as abatement contractors, risk assessors, inspectors, abatement workers, or sampling technicians, or others having been trained in a HUD-approved course in lead-safe work practices).

(6) Coastal Barrier Resources Act.
Pursuant to the Coastal Barrier
Resources Act (16 U.S.C. 3501), funds
may not be used for properties located
in the Coastal Barrier Resources System.

- (7) Flood Disaster Protection Act.
 Under the Flood Disaster Protection Act of 1973 (42 U.S.C. 4001–4128), funds may not be used for construction, reconstruction, repair or improvement of a building or mobile home which is located in an area identified by the Federal Emergency Management Agency (FEMA) as having special flood hazards unless:
- (a) The community in which the area is situated is participating in the National Flood Insurance Program in accordance with the applicable regulations (44 CFR parts 59–79), or less than a year has passed since FEMA notification regarding these hazards; and
- (b) Where the community is participating in the National Flood Insurance Program, flood insurance on the property is obtained in accordance with section 102(a) of the Flood Disaster Protection Act (42 U.S.C. 4012a(a)). You are responsible for assuring that flood insurance is obtained and maintained for the appropriate amount and term.
- (8) National Historic Preservation Act. The National Historic Preservation Act of 1966 (16 U.S.C. 470) (NHPA) and the regulations at 36 CFR part 800 apply to the mold intervention and related hazard control activities that are

- undertaken pursuant to this program. HUD and the Advisory Council for Historic Preservation have developed an optional Model Agreement for use by grantees and State Historic Preservation Officers in carrying out any lead hazard control activities under this program. A Model Agreement (Prototype Programmatic Agreement) is available at the Office of Healthy Homes and Lead Hazard Control's Web site, linked to http://www.hud.gov.
- (9) Waste Disposal. Waste disposal will be handled according to the requirements of the Occupational Health and Safety Administration (OSHA) (e.g., 29 CFR part 1910 and/or 1926, as applicable), the EPA (*e.g.*, 40 CFR parts 61, 260–282, 300–374, and/or 700-799, as applicable), the Department of Transportation (e.g., 49 CFR parts 171-177), and/or appropriate State or local regulatory agencies and applicable EPA, HUD, State and local regulatory agency guidance. You must handle disposal of wastes from hazard control activities that contain lead-based paint, but are not classified as hazardous in accordance with State or local law or the HUD Guidelines for the Evaluation and Control of Lead-Based Hazards in Housing (HUD Guidelines). The HUD Guidelines may be downloaded from the HUD Web site at http:// www.hud.gov.
- (10) Worker Protection Procedures. You must comply with the procedures for worker protection established in the HUD Guidelines as well as the requirements of the OHSA, e.g., 29 CFR part 1910 and/or 1926, as applicable, or the state or local occupational safety and health regulations, whichever are more stringent.
- (11) Written Policies and Procedures. You must have written policies and procedures for all phases of intervention, including evaluation, development of specifications, financing, occupant relocation, independent project inspection, and clearance testing (e.g., for mold, lead, carbon monoxide or other hazards, as applicable). You and all your subcontractors, sub-recipients, and their contractors must comply with these policies and procedures.
- (12) Clearance Testing for Lead Hazard Control Activities. Clearance dust testing must be conducted according to the EPA lead hazards standards rule (40 CFR part 745) for abatement projects and the Lead-Safe Housing rule (24 CFR part 35) for lead hazard control activities other than abatement. These are available at http://www.epa.gov/lead and http://www.hud.gov, respectively.

- (13) Continued Availability of Safe Housing to Low-Income Families. Units in which housing-based hazards have been controlled under this program shall be occupied by and/or continue to be available to low-income residents for not less than three years following the completion of intervention activities.
- (14) Environmental Review. See Section VIII (Environmental Requirements) of this program section.
- (15) *Relocation.* Any person (including individuals, partnerships, corporations or associations) who moves from real property or moves personal property from real property directly (1) because of a written notice to acquire real property, in whole or in part, or (2) because of the acquisition of the real property, in whole or in part, for a HUDassisted activity, is covered by Federal relocation statutes and regulations. Specifically, this type of move is covered by the acquisition policies and procedures and the relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 URA, as amended, and the implementing government-wide regulation at 49 CFR part 24. The relocation requirements of the URA and the government-wide regulations cover any person who moves permanently from real property or moves personal property from real property directly because of acquisition, rehabilitation or demolition for an activity undertaken with HUD assistance. See Section V(G) of the General Section of the SuperNOFA for additional information about relocation.
- (16) Data Collection and Provision. You must collect, maintain and provide to HUD the data necessary to document the various approaches used to evaluate and control housing-based hazards, including evaluation and control methods, building conditions, medical and familial information (with confidentiality of individually-identifiable information ensured) in order to determine the effectiveness and relative cost of these methods.
- (17) Section 3 Employment Opportunities. Recipients of assistance in the Healthy Homes Demonstration Program must comply with Section 3 of the Housing and Urban Development Act of 1968, 12 U.S.C. 1701u (Economic Opportunities for Low- and Very Low-Income Persons in Connection with Assisted Projects) and the HUD regulations at 24 CFR part 135, including the reporting requirements of subpart E. Please see section V(E) of the General Section of the SuperNOFA for additional information about section 3 requirements.

- (18) Certifications and Assurances. You must include the certifications and assurances listed in section V (H) of the General Section of this SuperNOFA with your application. A Certification of Consistency with the Consolidated Plan is not required for the Healthy Homes Demonstration NOFA.
- (19) Davis-Bacon Act. The Davis-Bacon Act does not apply to this program. However, if program funds are used in conjunction with other Federal programs in which Davis-Bacon prevailing wage rates apply, then Davis-Bacon provisions would apply to the extent required under the other Federal programs.
- (20) Conducting Business in Accordance with HUD Core Values and Ethical Standards. If awarded assistance under the Healthy Homes Demonstration NOFA, you will be required, prior to entering into a grant agreement with HUD, to submit a copy of your code of conduct and describe the methods you will use to ensure that all officers, employees, and agents of your organization are aware of your code of conduct. See section V(B)(3) of the General Section of the SuperNOFA for information about conducting business in accordance with HUD's core values and ethical standards.
- (21) Ensuring the Participation of Small Businesses, Small Disadvantaged Businesses, and Women-Owned Businesses. HUD is committed to ensuring that small businesses, small disadvantaged businesses and womenowned businesses participate fully in HUD's direct contracting and in contracting opportunities generated by HUD grant funds. Too often, these businesses still experience difficulty accessing information and successfully bidding on Federal contracts. HUD regulations at 24 CFR 85.36(e) require recipients of assistance (grantees and sub-grantees) to take all necessary affirmative steps in contracting for purchase of goods or services to assure that minority firms, women's business enterprises, and labor surplus area firms are used when possible. Affirmative steps shall include:
- (a) Placing qualified small and minority businesses and women's business enterprises on solicitation lists;
- (b) Assuring that small and minority business and women's business enterprises are solicited whenever they are potential sources;
- (c) Dividing total requirements, when economically feasible, into smaller tasks or quantities to permit maximum participation by small and minority business and women's business enterprises;

- (d) Establishing delivery schedules, where the requirement permits, which encourage participation by small and minority business and women's business enterprises;
- (e) Using the services and assistance of the Small Business Administration and the Minority Business Development Agency of the Department of Commerce; and
- (f) Requiring the prime contractor, if subcontracts are to be let, to take the affirmative steps listed in paragraphs (V) (a) through (e) above.

Refer to section V(F) the General Section of the SuperNOFA for additional information.

(22) Human Subjects Research. In conformance with the Common Rule (Federal Policy for the Protection of Human Subjects, codified by HUD at 21 CFR part 60), if your research involves human subjects, your organization must provide an assurance (e.g., a letter signed by an appropriate official) that the research has been reviewed and approved by an Institutional Review Board (IRB) before you can receive funds from HUD for activities that require IRB approval. Before proceeding with activities that require IRB approval, you must provide the number for your organization's assurance (i.e., an "institutional assurance") that has been approved by the Department of Health and Human Service's Office of Human Research Protections (OHRP). For additional information on what constitutes human subject research or how to obtain an institutional assurance see the OHRP Web site at http:// www.ohrp.osophs.dhhs.gov.

V. Application Selection Process

(A) Rating and Ranking. Please see section VI of the General Section of the SuperNOFA. Only those applications that meet the threshold requirements will be rated and ranked. HUD intends to award the highest ranked applications receiving a minimum score of 75 within the limits of funding.

In evaluating applications for funding, HUD will take into account an applicant's past performance in managing funds, including the ability to account for funds appropriately; timely use of funds received either from HUD or other Federal, State or local programs; meeting performance targets for completion of activities and number of persons to be served or targeted for assistance. HUD may use information relating to these items based on information at hand or available from public sources such as newspapers, Inspector General or Government Accounting Office Reports or Findings, hotline complaints that have been

proven to have merit, or other such sources of information. In evaluating past performance, HUD may elect to deduct points from the rating score as specified under the Factors for Award or set threshold levels for performance as specified in the funding announcement.

(B) Factors for Award Used to Evaluate and Rate Applications. The factors for rating and ranking applicants, and maximum points for each factor, are stated below. The maximum number of points to be awarded is 102, including the potential for two bonus points for RC/EZ/EC, as described in the section VI (C) (1) of the General Section of the SuperNOFA.

Rating Factor 1: Capacity of the Applicant and Relevant Organizational Experience (20 Points)

This factor addresses your organizational capacity necessary to successfully implement your proposed activities in a timely manner. The rating of you or your staff includes any faithbased and other community-based organizations, sub-contractors, consultants, sub-recipients, and members of consortia that are firmly committed to your project. Applicants that are, or propose to either partner, fund, or sub-contract with grassroots organizations, including faith-based and other community-based non-profits, in conducting their work programs will receive higher rating points as specified in section II of the General Section of the SuperNOFA. In rating this factor, HUD will consider the four items listed below.

(1) Your recent, relevant and successful demonstrated experience in undertaking eligible program activities. You must describe the knowledge and experience of the proposed overall project director and day-to-day project manager in planning and managing large and complex interdisciplinary programs, especially those involving housing, public health, or environmental programs. In your narrative response for this factor, you should include information on your project staff, their experience, percentage commitment to the project, and position titles. Resumes of up to three pages each and position descriptions for up to three key personnel in addition to the project director and project manager, and a clearly delineated organizational chart for the Healthy Homes project you propose, must be included in Appendix 1 of your application. Position descriptions and copies of job announcements (including salary range) should be included for any key positions that are currently vacant or

contingent upon an award. Indicate the name of the position of key personnel, the percentage of time that proposed staff will devote to your project and any salary costs to be paid by funds from this program. Include descriptions of the experience and qualifications of subcontractors and consultants. You may find it useful to include a table indicating the name, position and percentage contribution of staff members, specifying organizational affiliation. HUD reserves the right to terminate grant awards made to applicants that fail to timely hire (within 120 days of award) staff to fill key positions identified in the applicant's proposal as vacant.

(2) Your qualifications to carry out the proposed activities as evidenced by experience, academic background, training, and/or relevant publications of project staff. Whether you have sufficient personnel, or will be able to quickly retain qualified experts or professionals to begin your proposed project immediately, and to perform your proposed activities in a timely and effective fashion. Describe how principal components of your organization will participate in, or support, your project. You should thoroughly describe capacity, as demonstrated by experience in initiating and implementing related environmental, health, or housing projects.

(3) The past performance of the organization (applicant or partners) in another Healthy Homes or Lead Hazard Control grant, another grant related to environmental health and safety issues, or other experience in a similar program. Provide details about the nature of the project, the funding agency, and your performance, relative to performance measures or the achievement of desired health outcomes.

(4) If your organization is an existing Healthy Homes grantee, provide a description of the progress and outcomes achieved in that grant. If you received previous Healthy Homes Demonstration funding, this experience will be evaluated in terms of cumulative progress and achievements under the previous grant.

Appendix B provides a sample worksheet to facilitate your response to this Rating Factor.

Rating Factor 2: Need/Extent of the Problem (15 Points)

This factor addresses the extent to which there is a need for your proposed project activities to address documented problems related to healthy homes issues and housing-related hazards in your target area(s) and target group(s).

(1) Document a critical level of need for your proposed activities in the area where activities will be performed. You should pay specific attention to documenting the need as it applies to your target area(s), rather than the larger geographic area.

(2) Your documentation should summarize available data linking housing-based hazards to disease or injuries to children in your target area(s). Examples of data that might be used to demonstrate need include:

(a) Economic and demographic data relevant to your target area(s), including poverty and unemployment rates;

(b) Rates of childhood illnesses (e.g., asthma, allergies, hypertension, elevated blood lead levels) or injuries (e.g., falls, burns) among children residing in your target areas that could be caused or exacerbated by exposure to conditions in the home environment; and

(c) Unavailability of other Federal, State or local funding or private sector resources that could be, or are being, used to address the problem. Document what funding sources were investigated and why there were inadequate.

(3) For the areas targeted for your project activities, provide data available in your jurisdiction's currently approved Consolidated Plan and the Analysis of Impediments to Fair Housing Choice (AI) or Indian Housing Plan or derived from current census data or from other sources. Provide and reference data that address the following:

(a) The age and condition of housing;(b) The number and percentage of low- and very low-income families with

low- and very low-income families with incomes less than 50 percent and 80 percent of the median income, respectively, as determined by HUD, for the area, with adjustments for smaller and larger families. Statistics that describe low- and very-low income families are available at http:// www.huduser.org/datasets/il/fmr00/ sect82.html. Additional census statistics are available at: http://www.census.gov/ hhes/www/income00.html, http:// www.census.gov/hhes/income/ income00/statemhi.html, and http:// www.huduser.org/datasets/il/fmr00/ index.html;

(c) To the extent that statistics and other data contained in your community's Consolidated Plan or AI support the extent of the problem, you should include references to the Consolidated Plan or AI in your response; and

(d) Data documenting targeted groups that are traditionally underserved or have special needs. For a maximum score in this rating factor, data provided should specifically represent the target area. If the data presented in your response does not specifically represent your target area, you should discuss why the target areas are being proposed. If your application addresses needs that are in the Consolidated Plan or AI, you will receive more points than applicants that do not relate their project to a previously identified need.

Sample worksheets are provided at Appendix B to facilitate your response to Rating Factor 2.

Rating Factor 3: Soundness of Approach (40 Points)

This factor addresses the quality and cost-effectiveness of your proposed work plan. You should present information on the proposed approach for addressing housing-based hazards and describe how proposed activities would help HUD achieve its goals for this program area. For you to receive maximum points for this factor, there must be a direct relationship between the proposed activities, documented and demonstrated community needs, and the purpose of the project. Your application will be evaluated according to the comprehensiveness of addressing activities that are applicable to your project. The response to this factor should include details about your technical approach and project activities. HUD is looking for a clear statement of activities, timeline form completing the work and expected deliverables, including any quantitative deliverables.

(1) Approach for Implementing the Project (25 points).

(a) Technical Approach. Describe your overall technical approach for strategizing and implementing your proposed project. Your narrative response to this sub-factor will be used to assess how well your proposed project will be executed. The discussion must include a work plan of essential elements, such as who, what, when, where and how the project will be performed and provide information about the execution of the project. In this factor, describe the methods, schedule, and quality assurance activities that will be carried out to identify and control housing-based hazards and to achieve the desired project outcomes.

(b) Project Activities. Your project description must include a discussion of specific planned project activities that address one or more of the following activities.

(i) Describe in detail how you will identify, select, prioritize, and enroll units of eligible housing in which you

will undertake housing-based hazard interventions, how you will integrate safe work practices into housing maintenance, repair, and improvements, and then target such units to lowincome families with young children. Describe impediments that you anticipate for recruitment, measures you will perform to sustain recruitment, and the staff responsible for both monitoring recruitment status and implementing the measures identified to sustain recruitment. You should use all reasonably available sources of information on controlling housingbased hazards in buildings and protecting workers and occupants during and after the intervention process.

(ii) Describe any assessment tools you would employ to establish baseline data. These tools include questionnaires, visual assessment protocols and environmental sampling and analysis. Include a description of the Informed Consent/Disclosure process you intend to follow and relevant Institutional Review Board (IRB) procedures. In particular, describe how you will provide informed consent (e.g., from the subjects, and their parents and guardians, as applicable) to help ensure their understanding of, and consent to, the elements of informed consent, such as the purposes, benefits and risks of the research activities. Describe how this information will be provided and how the consent will be collected. For example, describe the use of "plain language" forms, flyers, and verbal scripts, and your plans to work with families with Limited English Proficiency or primary languages other than English, and with families including persons with disabilities.

(iii) Describe your process for evaluating units of eligible housing in which you will undertake housing-based hazard interventions. Provide the estimated total number of owner-occupied and/or rental units in which you will perform assessments and conduct interventions.

(iv) Describe any specialized testing, if any, or visual inspection that you will conduct during unit inspection with reference to source(s) of the protocol(s). Provide a description of protocols or include protocols in an appendix of your application.

(v) Discuss efforts to incorporate costeffective methods to address multiple environmental health and safety hazards, and describe the specific interventions you will utilize to control housing-based hazards before children are affected; and/or to control these hazards in units where children have already been treated for illnesses or injuries associated with housing-based hazards (e.g., burns, lead poisoning, asthma). Provide an estimate of the cost of each intervention and an estimate of costs projected per unit. (You may want to provide these cost estimates in a tabular format.)

(vi) Describe the process for your referral of children for medical case management if this is not ongoing and the organizations that will be involved in this process.

(vii) Describe your process for the development of work specifications for the selected interventions.

(viii) Describe your management processes to be used to ensure the costeffectiveness of the housing interventions.

(ix) Discuss your process to select and obtain contractors for conducting interventions in selected units and provide details about the competitive bidding process, if applicable.

(x) Describe your plan for the relocation of occupants of units selected for intervention, if relocation is necessary. Describe criteria that will determine the need for relocation and identify staff who will make relocation decisions. Address the use of safe houses and other housing arrangements, storage of household goods, stipends, incentives, etc., and the source of funding for relocation.

(xi) Describe your plan for ensuring right of return and/or first referral for occupants of units selected for intervention who have had to move for intervention to occur.

(xii) Describe how you will affirmatively further fair housing, which would include, but not be limited to: Affirmative marketing of the program to those least likely to apply based on race, religion, disability, and large families, especially when persons in these demographic groups are generally not served by the nonprofit or faith-based applicant or partner organizations; using a variety of materials for outreach to persons with disabilities and with Limited English Proficiency (LEP); assuring long-term residency by families currently living in the community; assuring that priority for treated units go to those who need the features (treatment) of the unit, and issues of environmental justice.

(xiii) Describe the financing strategy, including eligibility requirements, terms, conditions, and amounts available, to be employed in conducting housing-based hazards activities. You must discuss the way funds will be administered (e.g., use of grants, deferred loans, forgivable loans, other resources, private sector financing, etc.)

as well as the agency that will administer the process.

(xiv) Describe your proposed methods for community and/or targeted education and training. These should include community awareness, education, training, and outreach programs that support your work plan and are culturally sensitive, targeted, and linguistically appropriate. Provide information about specific educational/ outreach activities with quantitative data (number of individuals to be reached, etc.) and a description of the intended audience. Describe proposed activities to deliver culturally appropriate educational materials and methods to the target population and communities. Describe efforts to understand and incorporate culturally sensitive approaches to assessment and interventions.

(xv) Provide detailed information about training staff to provide the knowledge and skills required to address Healthy Homes issues that are essential for successfully implementing your project (e.g., assessments and interventions). Include an outline of training curricula and a description of qualifications of trainers. Describe how Healthy Homes training programs will be expanded to include public housing agencies or tribally Designated Housing Entities and other potential collaborators, such as faith-based and community organizations.

(xvi) Describe your proposed involvement of neighborhood, or faith-based and other community-based organizations in the proposed activities. These activities may include outreach, community education, marketing, inspection, and housing evaluations and interventions.

(xvii) Describe your proposed methods to reach high-risk groups and communities, vulnerable populations and persons traditionally underserved.

(xviii) Indicate if, and describe how, you will address any of HUD's Departmental policy priorities (see the section II of the General Section of the SuperNOFA for a fuller explanation of HUD's policy priorities). Applicants that include work activities that specifically address one or more applicable policy priorities will receive higher rating scores than applicants that do not address these HUD priorities, up to a maximum of 3 points. Policy priorities that are potentially applicable to the Healthy Homes Demonstration NOFA are: Improving the Quality of Life in our Nation's Communities; Providing Full and Equal Access to Faith-Based and Other Community-Based Organizations in HUD Program Implementation;

Colonias; and Participation in Energy Star.

(2) Approach for Managing the Project. (12 points). Describe your project goals and objectives and the strategy you will use in managing and executing the project. You should provide information on the general approach and overall plan employed.

(a) Baseline Plan for Project Management (10 points). Include a

management plan that:

- (i) Lists the project objectives, major tasks and activities. All specific activities necessary to complete the proposed project must be included in the task listing;
- (ii) Incorporates appropriate performance goals and benchmarks;
- (iii) Identifies major milestones and provides a schedule for the assignment, tracking and completion of major tasks and activities, and a timeframe for delivery;
- (iv) Ensures that quality assurance activities and corrective actions are managed;
- (v) Designates resources and identifies responsible entities;
- (vi) Describes the strategy and methods for coordination and communication between partners; and
- (vii) Describes the management processes to manage costs and ensure that cost-effective housing interventions will be implemented.
- (b) Budget Justification (2 points). Your proposed budget will be evaluated for the extent to which it is reasonable, clearly justified, and consistent with the project management plan and intended use of program funds. HUD is not required to approve or fund all proposed activities. Your budget should be submitted in the format recommended in Appendix E (Forms) of this NOFA. An electronic spreadsheet and other budgetary forms are available at HUD's Web site, http://www.hud.gov. You must thoroughly document and justify all budget categories and costs (HUD Form 424–C) and all major tasks for yourself, sub-recipients, partners, major subcontractors, joint venture participants, or others contributing resources to the project. Describe clearly and in detail your budgeted costs for each required program element (major task) included in your overall plan.
- (3) Economic Opportunity (3 points). To the greatest extent feasible, your project should promote job training, employment, and other economic opportunities for low-income and minority residents and businesses which are owned by, and/or employ, low-income and minority residents as defined in 24 CFR 135.5. You should:

- (a) Describe how you or your partners will comply with section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u) and HUD's implementing rules at 24 CFR part 135. Describe how you will accomplish this requirement by (1) providing training and employment opportunities for lowand very low-income persons living within the grantee's jurisdiction, and by (2) providing business opportunities to businesses owned by low- and very lowincome persons living within the targeted jurisdiction;
- (b) Describe how your project will give preference to hiring low- and very low-income persons or contracting with businesses owned by or employing low- and very-low income persons. Information about section 3 requirements is available by searching HUD's Web site, http://www.hud.gov;
- (c) Describe how your proposed project will further and support the policy priorities of the Department (section II of the General Section of the SuperNOFA and Rating Factor 3 (1)(b)(xviii) of this NOFA), including providing opportunities for self-sufficiency, particularly for persons enrolled in welfare-to-work programs, or providing educational and job training opportunities; and
- (d) Describe the extent to which your proposed activities will occur in an Empowerment Zone or Enterprise Community (EZ/EC), Urban Enhanced Enterprise Community (EEC), or Strategic Planning Community or Renewal Community (RC) as defined in section VI (C)(1) of the General Section of the SuperNOFA.

Rating Factor 4: Leveraging Resources (10 Points)

This factor addresses your ability to secure other community resources (e.g., financing, supplies or services) that can be combined with HUD's resources to achieve project purposes. These community resources may be contributions from organizations such as the applicant, partners, or other organizations not directly involved in the project.

(1) In evaluating this factor, HUD will consider the extent to which you have developed partnerships to secure additional resources to increase the effectiveness of your proposed project. Describe how other organizations will participate in or support your project. Resources may include funding or inkind contributions (e.g., labor, fringe benefits, services, supplies, or equipment) budgeted for your proposed project. Resources may be provided by State and local governmental entities,

public or private organizations, or other partners.

(2) Each source of contributions (financial or in-kind) must be supported by a letter of commitment from the contributing entity, whether the applicant, a partner organization, or a public or private source. The letter must describe the contributed resource(s) that will be used in your project and the dollar value of each contribution. Staff in-kind contributions should be given a market-based monetary value. If you fail to provide letters of commitment with specific details, including the amount of the actual contributions, you will not get rating points for this factor. Each letter of commitment, memorandum of understanding, or agreement to participate shall include the organization's name and the proposed level of commitment and responsibilities as they relate to the proposed project. The commitment must be signed by an official legally able to make commitments on behalf of the organization. Letters of support (letters that indicate support, but do not specify a monetary commitment to the project) will not be considered in the scoring of Rating Factor 4. Include information to address the following elements.

(a) The extent to which you have coordinated your activities with other known organizations that are not directly participating in your proposed work activities, but with which you share common goals and objectives.

(i) Describe your plan for integrating and coordinating housing-based hazard interventions with other housing-related activities (e.g., rehabilitation, weatherization, correction of code violations, and other similar work).

(ii) Describe your plans to generate and use public subsidies or other resources, such as revolving loan funds, to finance future interventions to prevent and control housing-based hazards, particularly in low- and very low-income housing.

(b) The extent to which your project exhibits the potential to be financially self-sustaining by decreasing dependence on Federal funding and relying more on State, local and private funding to continue healthy homes activities after the grant period is completed.

Rating Factor 5: Achieving Results and Program Evaluation (15 points)

This factor emphasizes HUD's commitment to ensuring that applicants keep promises made in their applications and assess their performance to ensure that performance goals are met. Achieving results means you, the applicant, have clearly

identified the benefits or outcomes of your program. Outcomes are ultimate goals. Benchmarks or outputs are interim activities or products that lead to the ultimate achievement of your goals.

Program evaluation requires that you, the applicant, identify program outcomes, interim products or benchmarks, and performance indicators that will allow you to measure your performance. Performance indicators should be objectively quantifiable and measure actual achievements against anticipated achievements. Your Evaluation Plan should identify what you are going to measure, how you are going to measure it, and the steps you have in place to make adjustments to your work plan if performance targets are not met within established timeframes.

This new rating factor reflects HUD's goal to embrace high standards of ethics, management and accountability. In evaluating this factor, HUD will consider how you have described outcome measures and benefits of your

In your response to this rating factor, you are to discuss the performance goals for your project, and identify specific outcome measures. You are also to describe how the outcome information will be obtained, documented, and reported. You must complete and return the Logic Model Form included in Appendix B of the General Section of the SuperNOFA showing your proposed project long-term, mid-term, short-term and final results, and how they support HUD's departmental goals and objectives. Information about developing a Logic Model is available at http://www.hud.gov.

In responding to this factor, you

should

(1) Identify and discuss the specific methods you will use to measure progress towards your goals, track and report results of interventions, and evaluate the effectiveness of interventions;

(2) Identify benchmarks that you will use to track the progress of your project;

- (3) Identify important project milestones (e.g., the end of specific phases in a multi-phased project) and deliverables specific to your project timeline;
- (4) Identify milestones that are critical to achieving project objectives (e.g., recruitment and sustainability of participants, the Institutional Review Board process, if applicable, or the process of Informed Consent);

(5) Identify how your project will be held accountable for meeting project goals, objectives, and the actions undertaken in implementing the grant program. You should provide assurances that work plans and performance measures developed for your project will be achieved in a timely and cost-effective manner;

(6) Provide data on those served by race, ethnicity, disability, size of family and ages of children, and single-parent households; and

(7) Provide a Logic Model that describes activities, assessments, interventions and outcomes for your project. Information and templates for the Logic Model are available at

http://www.hud.gov.

(C) Applicant Debriefing. See Section XI (A)(4) of the General Section of the SuperNOFA for information about applicant debriefing.

VI. Application Submission Requirements

(A) Applicant Information. You should submit your application in accordance with the format and instructions contained in this NOFA and in the section VII of the General Section of the SuperNOFA. The following is a list of required application contents. Your application must contain the items in the list below and in the General Section of the SuperNOFA. These requirements are presented as a "Checklist and Submission Table of Contents," provided in Appendix E of this NOFA.

(1) Transmittal letter (one-page only) that summarizes your proposed project, provides the dollar amount requested, and identifies you and your partners in

the application.

- (2) The name, mailing address, and telephone number of the principal contact person. If you are a consortium of associates, sub-recipients, partners, major subcontractors, joint venture participants, or others contributing resources to the project, similar information shall also be provided for each of these entities. You must specify the primary entity.
- (3) An abstract describing the goals and objectives of your proposed program (2-page limit, single-spaced, 12-point font, one-inch margins) must be included in the proposal.
- (4) Checklist and Submission Table of Contents. (Appendix E)
 - (5) Required Forms:

HUD Form 424, Standard Form for Application for Federal Assistance;HUD Form 424 B, Applicant Assurances and Certifications;

HUD Form 424 C, Budget Summary for Competitive Grant Programs; HUD Form 424 CBW;

HUD Form Logic Model Form;

HUD 2880, Applicant/Recipient Disclosure/Update Report; HUD 2990, Certification of Consistency with EZ/EC Strategic Plan, if applicable;

Form SF–LLL, Disclosure of Lobbying Activities, where applicable; HUD 2993, Acknowledgment of Application Receipt; and HUD 2994, Client Comments and

Suggestions (optional).

A Certification of Consistency with the Consolidated Plan is not required for this application.

- (6) A narrative statement addressing the rating factors for award. The narrative statement must be numbered in accordance with each factor for award (Rating Factors 1 through 5). The response to the rating factors must not exceed a total of 25 pages (single-spaced, 12 point font, one-inch margins). Any pages in excess of this limit will not be read. Key points to consider in preparing your application are provided in Appendix C of this NOFA.
- (7) Any attachments, appendices, references, or other relevant information that directly support the narrative may accompany it, but must not exceed twenty (20) pages (12-point font with one-inch margins) for your entire application. Any pages in excess of this limit will not be read. Specific criteria for the content of the appendices for the Healthy Homes Demonstration Program grant application are listed in the Checklist and Submission Table of Contents (see Appendix E of this NOFA.)
- (8) A detailed budget with supporting cost justification for all budget categories of your funding request, in accordance with Rating Factor 3, element (2)(b). This information will not be counted towards the page limits. A detailed budget must also be provided for any subcontractors, subgrantees, or subrecipients receiving more than 10 percent of the Federal budget request.
- (9) The resumes and position descriptions of your project director and project manager and up to three additional key personnel (in accordance with Rating Factor 1), not to exceed three pages each (single-spaced, 12-point font with one-inch margins). This information is to be included in Appendix 1 of your application and will not be counted towards the page limit.

VII. Corrections to Deficient Applications

Section VIII of the General Section of the SuperNOFA provides the procedures for corrections to deficient applications.

VIII. Environmental Requirements

Activities assisted under this program are subject to HUD environmental review to the extent required under 24 CFR part 50. An award under the Healthy Homes Initiative does not constitute approval of specific sites where activities may be carried out. Following award execution, HUD will perform environmental reviews for activities to be carried out on properties proposed by your organization. You must comply with HUD's regulations in 24 CFR 50.3(h) in carrying out responsibilities regarding environmental review. You may not rehabilitate, convert, repair or construct a property, or commit or expend program funds or non-HUD funds for these program activities for any eligible property, until you receive written notification from the appropriate HUD official that HUD has completed its environmental review and the property has been approved. The results of environmental reviews may require that proposed activities be modified or proposed sites rejected. Recipients of a grant under this NOFA will be given guidance in these responsibilities.

IX. HUD Reform Act of 1989

The provisions of the HUD Reform Act of 1989 that apply to this NOFA are explained in the section XI (A) of the General Section of the SuperNOFA.

X. Authority

The authority for this program is sections 501 and 502 of the Housing and Urban Development Act of 1970 and the Consolidated Appropriations Resolution of 2003, Public Law 108–7, approved February 20, 2003.

Appendix A: Housing-Related Health and Injury Hazards

The following briefly describes the housing-associated health and injury hazards HUD considers key targets for intervention. More information about housing-associated health and injury hazards is available at the Healthy Homes Initiative Web site, at http://www.hud.gov.

Allergens and asthma: Experts estimate that 14 million Americans have asthma, with an associated annual cost of \$6.2 billion. Asthma is now recognized as the leading cause of school and work absences, emergency room visits and hospitalizations. For sensitized children, exposure to antigens from dust mites, certain pets, and cockroaches has been associated with more severe asthma. There is a preponderance of evidence showing a dose-response relationship between exposure and prevalence of asthma and allergies; some evidence also indicates that exposure to antigens early in life may predispose or hasten the onset of allergies and asthma. Dust mites have been identified as the largest

trigger for asthma and allergies. Cockroach allergens appear to be excessive in 30–50 percent of inner-city housing and affect 5-15 percent of the population, whereas dust mites appear to be the dominant allergen in other environments.

Interventions known to have beneficial effects include the installation of impervious mattress and pillow covers, which can reduce allergen exposure by 90 percent. Other dust mite control measures include dehumidification, laundering bedding, and removal of carpets and other dust sinks. Cleaning carpets with tannic acid solution has also been demonstrated to greatly reduce dust mites. Asthma prevention program costs have been estimated at about \$500 per unit, which includes about \$150 for educational interventions. Additional information is available in HUD's research topic paper, "Healthy Homes Issues: Asthma" available at the Resources, Technical Resources link of HUD's Healthy Homes Initiative Web site, linked to HUD's Web site, http:// www.hud.gov.

Asbestos: Asbestos is a mineral fiber that has been used commonly in a variety of building construction materials and household products for insulation and as a fire-retardant. The Environmental Protection Agency (EPA) and the Consumer Product Safety Commission (CPSC) have banned most asbestos products. Manufacturers have also voluntarily limited uses of asbestos. Today, asbestos is most commonly found in older homes, in pipe and furnace insulation materials, asbestos shingles, millboard, textured paints and other coating materials, and floor tiles. Elevated concentrations of airborne asbestos can occur when asbestoscontaining materials (ACMs) are disturbed by cutting, sanding or other remodeling activities. Improper attempts to remove these materials can release asbestos fibers into the air in homes, increasing asbestos levels and endangering the people living in those homes. The most dangerous asbestos fibers are too small to be visible. After they are inhaled, they can remain and accumulate in the lungs. Asbestos can cause lung cancer, mesothelioma (a cancer of the chest and abdominal linings), and asbestosis (irreversible lung scarring that can be fatal). Most people with an asbestos-related disease were exposed to elevated concentrations on the job; some developed disease from exposure to clothing and equipment brought home from job sites. As with radon, doseresponse extrapolations suggest that lower level exposures, as may occur when asbestoscontaining building materials deteriorate or are disturbed, may also cause cancer.

Intact asbestos-containing materials are not a hazard; they should be monitored for damage or deterioration and isolated if possible. Repair of damaged or deteriorating ACMs usually involves either sealing (encapsulation) or covering (enclosure) it. Repair is usually cheaper than removal, but it may make later removal of asbestos more difficult and costly. Repairs should be done only by a professional who is trained and certified to handle asbestos safely. Repairs can cost from a few hundred to a few thousand dollars and removal can be more expensive.

Combustion products of heating and cooking appliances: Burning of oil, natural gas, kerosene, and wood for heating or cooking purposes can release a variety of combustion products of health concern. Depending upon the fuel, these may include carbon monoxide (a chemical asphyxiant), oxides of nitrogen (respiratory irritants). polycyclic aromatic hydrocarbons (e.g., the carcinogen benzo[a]pyrene), and airborne particulate matter (respiratory irritants). Carbon monoxide, an odorless gas, can be fatal. Nitrogen dioxide can damage the respiratory tract, and sulfur dioxide can irritate the eyes, nose and respiratory tract. Smoke and other particulates irritate the eyes, nose and throat, and can cause lung cancer.

Improper venting and poor maintenance of heating systems and cooking appliances can dramatically increase exposure to combustion products. Experts recommend having combustion heating systems inspected by a trained professional every year to identify blocked openings to flues and chimneys, cracked or disconnected flue pipes, dirty filters, rust or cracks in heat exchangers, soot or creosote build-up, and exhaust or gas odors. Installing a carbon monoxide detector is also recommended; however, such a detector will not detect other combustion by-products.

Insect and rodent pests: The observed association between exposure to cockroach antigen and asthma severity has already been noted above. In addition, cockroaches may act as vehicles to contaminate environmental surfaces with certain pathogenic organisms. Rodents can transmit a number of communicable diseases to humans, either through bites, arthropod vectors, or exposure to aerosolized excreta. In addition, humans can become sensitized to proteins in rodent urine, dander and saliva. Such sensitization may contribute to asthma severity among children. Insect and rodent infestation is frequently associated with substandard housing that makes it difficult to eliminate. Treatment of rodent and insect infestations often includes the use of toxic pesticides that may present hazards to occupants (see below). Integrated pest management (IPM) for rodents and cockroaches, which reduces the use of pesticides, is estimated to cost approximately \$150 per unit. IPM control measures include sealing holes and cracks, removing food sources and the use of traps. In technical terms, IPM is the coordinated use of pest and environmental information with available pest control methods to prevent unacceptable levels of pest damage by the most economical means and with the least possible hazard to people, property, and the environment. (One information source is the University of Minnesota's electronic textbook of Integrated Pest Management, available at http://ipmworld.umn.edu/ textbook.htm.)

Lead: Exposure to lead, especially from deteriorating lead-based paint, remains one of the most important and best-studied of the household environmental hazards to children. Although blood lead levels have fallen nationally, a large reservoir of lead remains in housing. The National Health and Nutrition Examination Survey (1991-1994)

showed that nearly one million U.S. preschoolers still have elevated blood lead levels. Overall, the prevalence rate among all children under six years of age is 4.4 percent. Among low-income children living in older housing where lead-based paint is most prevalent, the rate climbs to 16 percent; and for African-American children living in such housing, it reaches 21 percent.

The National Survey of Lead and Allergens in Housing (2000) estimates that 38 million dwellings have some lead-based paint, and that 24 million have significant lead-based paint hazards. Of those, about 4.8 million have young children and of those, about 1.2 million have household incomes under \$30,000 per year. Costs for Lead Hazard Control can range anywhere from \$500 to \$15,000 per unit. Corrective measures include paint stabilization, enclosure and removal of certain building components coated with lead paint, and cleanup and "clearance testing," which ensures the unit is safe for young children.

Mold and moisture: An analysis of several pulmonary disease studies estimates that 25 percent of airways disease, and 60 percent of interstitial lung disease may be associated with moisture in the home or work environment. Moisture is a precursor to the growth of mold and other biological agents, which is also associated with respiratory symptoms. An investigation of a cluster of pulmonary hemosiderosis (PH) cases in infants showed PH was associated with a history of recent water damage to homes and with levels of the mold Stachybotrys atra (SA) in air and in cultured surface samples. Associations between exposure to SA and "sick building" symptoms in adults have also been observed. Other related toxigenic fungi have been found in association with SAassociated illness and could play a role. For sensitive individuals, exposure to a wide variety of common molds may also aggravate asthma. Addressing mold problems in housing requires coordination among the medical, public health, microbiological, housing, and building science communities. Additional information is available in HUD's research topic paper, "Healthy Homes Issues: Mold" available at the Resources, Technical Resources link of HUD's Healthy Homes Initiative website, linked to HUD's Web site, http://www.hud.gov.

The cost of mold/moisture-related intervention work (e.g., IPM, clean and tune furnace, remove debris, vent clothes dryer, cover dirt floor with impermeable vapor barrier) is a few hundred dollars, unless major modification of the ventilation system is needed. For example, in Cleveland, mold interventions, including repairs to ventilation systems and basement flooring, in the most heavily contaminated homes range from \$500-\$5,000, with some costs also being dedicated to lead hazard control simultaneously through its Lead+Asthma

program.

Pesticide residues: According to the EPA, 75 percent of U.S. households used at least one pesticide product indoors during the past year. Products used most often are insecticides and disinfectants. Another study suggests that 80 percent of most people's exposure to pesticides occurs indoors and

that measurable levels of up to a dozen pesticides have been found in the air inside homes. The amount of pesticides found in homes appears to be greater than can be explained by recent pesticide use in those households; other possible sources include contaminated soil or dust that migrates in from outside, stored pesticide containers, and household surfaces that collect and then release the pesticides. Pesticides used in and around the home include products to control insects (insecticides), termites (termiticides), rodents (rodenticides), molds and fungi (fungicides), and microbes (disinfectants). In 1990, the American Association of Poison Control Centers reported that some 79,000 children were involved in common household pesticide poisonings or exposures. In households with children under five years of age, almost half stored at least one pesticide product within the reach of children. Exposure to chlorpyriphos (CP), a commonly used organophosphate insecticide, in the prenatal and early postnatal period may impair neurological development. While CP is a biodegradable pesticide, substantial persistence of CP in house dust has been demonstrated. Exposure to high levels of cyclodiene pesticides, commonly associated with misapplication, has produced various symptoms, including headaches, dizziness, muscle twitching, weakness, tingling sensations, and nausea. In addition, the EPA is concerned that cyclodienes might cause long-term damage to the liver and the central nervous system, as well as an increased risk of cancer.

There are available data on hazard evaluation methods and remediation effectiveness regarding pesticide residues in the home environment.

Radon progeny: The National Academy of Sciences estimates that approximately 15,000 cases of lung cancer per year are related to radon exposure. Epidemiologic studies of miners exposed to high levels of radon in inhaled air have defined the dose response relation for radon-induced lung cancer at high exposure levels. Extrapolation of this data has been used to estimate the excess risk of lung cancer attributable to exposure to radon gas at the lower levels found in homes. These estimates indicate that radon gas is an important cause of lung cancer deaths in the U.S. Excessive exposures are typically related to home ventilation, structural integrity and location.

Radon measurement and remediation methods are well developed, and the EPA recommends that every home be measured for radon. The EPA estimates that materials and labor costs for radon reduction in an existing home are \$800–\$2,500. Including radon resistant techniques in new home construction costs \$350–\$500, and can save up to \$65 annually in energy costs, according to the EPA.

Take-home hazards from work/hobbies and work at home: When the clothing, hair, skin, or shoes of workers become contaminated with hazardous materials in the workplace, such contaminants may inadvertently be carried to the home environment and/or an automobile. Such "take-home" exposures have been

demonstrated, for example, in homes of leadexposed workers. In addition, certain hobbies or workplaces located in the home may provide an especially great risk of household contamination.

Control methods include storing and laundering work clothes separately, and showering and changing clothes before leaving work or immediately after arriving at home. Once a home becomes contaminated, cleaning floors and contact surfaces and replacing furnishings may be necessary to reduce exposures.

Unintentional injuries/fire: Unintentional injury is now the leading cause of death and disability among children younger than 15 years of age. In 1997, nearly 7 million persons in the U.S. were disabled for at least one full day by unintentional injuries received at home. During the same year, 28,400 deaths were attributable to unintentional home injuries, of which 1,800 occurred among children four years of age and younger. Among young children, three types of events accounted for more than 75 percent of deaths: fires/ burns; drownings; and mechanical suffocation. Falls and poisoning are the next most common causes of death.

Home visitation protocols have been shown to be effective in reducing exposure to such hazards. The "add-on" cost of injury prevention measures, when combined with other housing interventions are estimated at about \$100 per unit. This includes the cost of some injury prevention devices (e.g., smoke alarms, electrical socket covers, etc.).

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APPENDIX B: SAMPLE WORKSHEETS

W	orksheet 1 - Key Personi	nel	
Name and Position Title (please include the organization position titles in addition to those shown)	Organizational Affiliation	Percent of Time Proposed for this Grant	Percent of time to be spent on other activities
		Note: These two c total 100%	olumns should
Overall Project Director			
Day-to-Day Program Manager			
		·	

Worksheet 2. Oth	ner Housing-Related Public Health Projects
Agency and Project Number	
Year Issued and Original Project	
Completion Date	
Current Projected Completion Date	
Amount Funded Major Performance Goals	
Major Performance Goals	
G	
Status of Progress	
Agency and Project Number	
Year Issued and Original Project Completion Date	
Current Projected Completion Date	
Amount Funded	
Major Performance Goals	
Status of Progress	
Agency and Project Number	
Year Issued and Original Project Completion Date	
Current Projected Completion Date	
Amount Funded	
Major Performance Goals	
Status of Progress	
Diatus VI I I Ugi Cos	

Worksheet 3. Incidences of Ast	hma, Other Child	hood Diseases or Injuries
Childhood Disea	ses and Injuries in Ta	rget Area
Name of TARGET AREA(S):		
Childhood Disease or Injury	Areas/Dates	Rates and Explanation
Asthma		
Other respiratory diseases (specify)		
Other diseases (specify)		
Other diseases (specify)		
Injuries (specify)		
Other		
Other		

	Worksheet 4	l. Inco	ome Statistics			
Target Area (City, County, Census Track, State, Zip Code)	Number of Families ≤50% of AMI*	%	Number of Families ≥50% - < 80% of AMI*	%	Total Number of Families <80% of AMI*	%
Total						

Source and Date of	
Estimate:	
AMI = Area Median Income	

Work	sheet 6. Anticipated He	althy Homes	Activities	
Activity	Who Will Perform This Activity? Identify	Number of Units	Estimated Unit Cost	Estimated Total Cost
	(In-house, contractor, faith-based or community-based non- profit organization, etc.)			
Lead Hazard Evaluation (Risk Assessment)				
Lead Hazard Control				
Clearance Testing				
Assessment (specify)				
Assessment (specify)				
Assessment (specify)				
Intervention (specify)				
Intervention (specify)		/www.wataraa.		
Intervention (specify)				
Post-intervention testing				
Other (specify)				71. ANN
Other (specify)				

Appendix C: Preparing Your Application

Rating Factor 1: Capacity of the Applicant and Relevant Organizational Experience

In this rating factor, you should provide details about the following:

1. The skills and experience of the staff and

1. The skills and experience of the staff and the applicant organization;

2. A description of the participating organization, its roles and experience;

- 3. The past performance of the organization (applicant or partners) in another Healthy Homes or Lead Hazard Control grant, another grant related to environmental health and safety issues, or other experience in a similar program; include the name of the project, funding organization, amount funded and desired outcomes and results achieved in these projects:
- 4. The percentage of time each staff person or subcontractor will devote to the project. A staffing table or roster may be helpful to address this element. You may want to use the template provided as Worksheet 1 of Appendix B;
- 5. Level of involvement of the applicant organization in general oversight of the project and oversight of the partnering organizations;

Rating Factor 2: Need/Extent of the Problem

In this rating factor, you should provide details about the following:

- 1. The location of the target area(s) and the rationale for selecting these area(s); include backup documentation;
- 2. The number of children at risk of environmental illnesses or injuries, and the sources of this information;
- 3. The age and condition of the housing to receive interventions, and the sources of this information:
- 4. The number of low- and very lowincome families and the demographic composition of families served by race, ethnicity, disability, size of family and ages of children, number of single-parent households in the target area(s);
- 5. Other socio-economic or environmental factors relating to need in the target area(s);
- 6. The relationship of the Consolidated Plan, Indian Housing Plan or the Analysis of Impediments to Fair Housing Choice (AI) to the request for assistance.

Rating Factor 3: Soundness of Approach

In this rating factor, you should provide details about the following:

- 1. A project work plan that identifies tasks, deliverables, and quality assurance activities and describes how the applicant will organize and perform Healthy Homes activities;
- 2. A schedule of deliverables and project milestones;
- 3. The target population for the project and the selection criteria involved, and the relationship of the activities to "Need/Extent of the Problem" as established in Rating Factor 2:
- 4. The number of families or individuals to be enrolled and/or units to receive assessment and interventions;
- 5. The rationale for selecting hazards of concern and intervention methods;
- 6. The mechanism for funding assessments and interventions;

- 7. The costs/unit for intervention;
- 8. The medical case management process, if applicable;
- 9. The process used to develop work specifications;
- 10. The temporary relocation plan, if appropriate, that includes who will decide on the need for relocation and the source of funding for relocation. Indicate how you will distinguish between temporary and permanent relocation and the benefits to be provided;
- 11. Awareness, outreach and education activities:
- 12. A discussion of project evaluation, data collection, and outcome analysis;
- 13. The proposed budget, with justification of costs by task;
- 14. Actions to affirmatively further fair housing;
- 15. Provisions for employment and economic development opportunities for low- and very low-income individuals;
- 16. Mechanisms for communication between the applicant organization and partners; and
- 17. The coordination of activities in this project with other similar projects being performed by the applicant or partnering organizations;

Rating Factor 4: Leveraging Resources

In this rating factor, you should provide details about the following:

- 1. Identify participating faith-based and community-based organizations and other private sector organizations that will contribute time and resources to the project;
- 2. Include (in Appendix 1 of your application) letters of commitment or memoranda of understanding from organizations. These letters must provide details about resources to be contributed and a dollar amount for the contributed (in-kind or matching) resources. (Letters of support that do not provide a dollar amount of contributed funding should be included in Appendix 2 of your application.);
- 3. Applicants should provide a discussion of their plans to enhance or expand partnership efforts under this application;
- 4. Describe how the effectiveness of grant funds will be increased as a result of leveraged efforts; and
- 5. Describe any existing or potential Community Reinvestment Act funding mechanisms.

Rating Factor 5: Achieving Results and Program Evaluation

In this rating factor, you should provide details about the following:

- 1. Desired outcomes for your project;
- 2. Mechanisms for collecting and archiving data to develop the outcome analysis; and
- 3. Include a Logic Model in this Rating Factor. (Information about developing a Logic Model is available at http://www.hud.gov.), and in the General Section of this SuperNOFA.

A tabular summary of the Rating Factors and Bonus Points is provided below.

Rating factor	Points
Capacity of the Applicant and Relevant Organizational Experience	20
2. Need/Extent of the Problem	15
3. Soundness of Approach	40
Leveraging Resources Achieving Results and Program	10
Evaluation Empowerment Zone and Enter-	15
prise Community Bonus Points	2
Total	102
10(a)	

Appendix D: References

To secure any of the documents listed, call the telephone number provided. A number of these references are provided on HUD's CD, "Residential Lead Desktop Reference, 3rd Edition." This CD can be obtained at no charge by calling the National Lead Information Clearinghouse, 1–800–424-LEAD.

Regulations

- 1. Worker Protection: The two Occupational Safety and Health Administration (OSHA) publications listed below can be purchased by calling either OSHA Regulations at 202–693–1888 or the Government Printing Office (GPO) at 202–512–1800 (these are not toll-free numbers).
- (a) General Industry Lead Standard, 29 CFR 1910.1025 (Document Number 869022001124). This document can be downloaded without charge from the OSHA Web site at http://www.osha-slc.gov/OshStd_data/1910_1025.html;
- (b) Lead Exposure in Construction, 29 CFR 1926.62, and appendices A, B, C, and D (Document Number 869022001141). This document can be downloaded without charge from the OSHA Web site at http://www.osha-slc.gov/OshStd data/1926 0062.html.
- 2. Waste Disposal. A copy of the EPA regulations at 40 CFR parts 260–268 can be purchased by calling 1–800–424–9346 (this is a toll-free number) or downloaded without charge from the EPA Web site at http://www.epa.gov/docs/epacfr40/chapt-I.info/subch-I.htm.
 - 3. Lead.
- (a) Requirements for Lead-Based Paint Activities in Target Housing and Child-Occupied Facilities; Final Rule: 40 CFR Part 745, (EPA) (Lead Hazard Standards, Work Practice Standards, EDP and State Certification and Accreditation programs for those engaged in lead-based paint activities). Can be purchased by calling the Toxic Substances Control Act Hotline at 202–554–1404 (this is not a toll-free number) or downloaded without charge from the EPA Web site at http://www.epa.gov/lead.

Guidelines

1. Guidelines for the Evaluation and Control of Lead-Based Paint Hazards in Housing; HUD, June 1995, and amended September 1997. These guidelines can be purchased by calling 1–800–245–2691 toll free or downloaded without charge from the HUD Web site at http://www.hud.gov/offices/lead.

- 2. Preventing Lead Poisoning in Young Children; Centers for Disease Control, October 1991. These guidelines can be obtained without charge by calling the CDC's toll-free number, 1–888–232–6789 or they can be downloaded from the HUD Web site at http://www.hud.gov/offices/lead.
- 3. Screening Young Children for Lead Poisoning: Guidance for State and Local Public Health Officials, November 1997; Centers for Disease Control and Prevention (CDC). These guidelines can be obtained without charge by calling the CDC's toll-free number, 1–888–232–6789 or they can be downloaded from the HUD Web site at http://www.hud.gov/offices/lead.

Reports

- 1. Putting the Pieces Together: Controlling Lead Hazards in the Nation's Housing, (Summary and Full Report); HUD, July 1995. A copy of this summary and report may be purchased by calling 1–800–245–2691 toll-free or through the HUD Web site at http://www.hud.gov/offices/lead.
- 2. The Healthy Homes Initiative: A Preliminary Plan (Summary and Full Report); HUD, April, 1999. A copy of this summary report may be obtained by calling NLIC's toll-free number, 1–800–424–LEAD, or downloaded from the HUD Web site at http://www.hud.gov/offices/lead.
- 3. Institute of Medicine. *Indoor Allergens. Assessing and Controlling Adverse Health*

- *Effects.* National Academy Press. Washington, DC 1993.
- 4. Mott L., Our Children at Risk. Natural Resources Defense Council. Washington, DC 1997. Can be ordered from the Internet from http://www.nrdc.org.
- 5. Rom W.N., Ed. *Environmental and Occupational Medicine*. Little, Brown and Co., Boston. 1992.
- 6. President's Task Force on Environmental Health Risks and Safety Risks to Children. Asthma and The Environment: An Action Plan to Protect Children. Washington, DC 1999. Eliminating Childhood Lead Poisoning: A Federal Strategy Targeting Lead Paint Hazards. Washington, DC 2000. Can be downloaded from the Internet without charge from http://www.epa.gov/children.

APPENDIX E. CHECKLIST AND SUBMISSION TABLE OF CONTENTS

CHECKLIST AND SUBMISSION TABLE OF CONTENTS HEALTHY HOMES DEMONSTRATION GRANT PROGRAM

The following checklist is provided to ensure you have submitted all required items to receive consideration for funding. You must assemble the application in the order shown below and note the corresponding page number where the response is located. You must include this checklist and submission table of contents with the proposal.

	Transmittal Letter (limited to one page)	Cover page
	Applicant Abstract (limited to a 2-pages; does not count towards 25-page limit)	
	Checklist and Submission Table of Contents	
	Application Forms (to be included in Appendix 3)	
	Form HUD 424 (Application for Federal Assistance)	
	Form HUD 424B (Assurances/Non-Construction Programs)	
	Form HUD 424-C (Budget Summary for Competitive Grant Programs)	
	Form HUD CBW (Budget Worksheet)	
	Form HUD Logic Model Form	
	Form Ethnicity and Race Data	
	Rating Factor Response (Total narrative response limited to 25 pages.)	
	1. Capacity of the Applicant and Relevant Organizational Experience	
	2. Need/Extent of the Problem	
	3. Soundness of Approach	
	4. Leveraging Resources	
	5. Achieving Results and Program Evaluation	
	Appendices	
	Appendix 1 – Required material in support of the Rating Factors (e.g., resumes of key	
	personnel, organizational chart, letters of commitment) arranged in order of Rating Factor. Does not count towards the 25-page limit; resumes limited to 3 pages each.	
П	Appendix 2 – Optional material in support of the Rating Factors, arranged in order of	
	Rating Factors, e.g., maps, letters of support. The 20-page limit applies to this	
	Appendix.	
	Appendix 3 – Material relating to the forms, or budget material. (See Application Forms, above.)	
	Form HUD 2993 Acknowledgment of Application Receipt	g
	Form HUD 2994 Client Comments and Suggestions (Optional)	

Appendix F: Forms and Administrative

This appendix lists the standard forms, certifications and assurances used by the programs that are part of this NOFA. Listed forms are located in Appendix B of the General Section of the SuperNOFA.

The following forms are to be used for the Programs listed in this NOFA:

- (1) Form HUD-424
- (2) Form HUD-424 B
- (3) Form HUD–424 C (4) Form HUD–424 CBW
- (5) Form HUD Logic Model Form (6) Application Checklist and Submission
- Table of Contents

(7) Ethnicity and Race Data

HUD has consolidated many of its application forms into a single HUD-424 form. The new HUD-424 consolidates budget-reporting forms for both construction and non-construction projects into a single form and eliminates having to have the following separate certifications: Certification for a Drug-Free Workplace (HUD-50070), the Certification of Payments to Influence Federal Transactions (HUD-50071), and the Certification Regarding Debarment and Suspension (HUD-2992).

New form HUD-424 replaces SF-424 and HUD-424 M

HUD-424 B replaces SF-424 B and D and HUD-50070, 50071 and 2992. HUD-424 C and CB replaces SF-424 A and

The HUD-424 CBW is added as a common detailed Budget Worksheet and replaces various budget worksheets used throughout the Department.

Administrative Costs

Administrative costs that may be applicable to the programs included in this NOFA are discussed below:

I. Purpose

The intent of this HUD grant program is to allow the Grantee to be reimbursed for the reasonable direct and indirect costs, subject to a top limit, for overall management of the grant. In most instances the grantee, whether a State or a local government, principally serves as a conduit to pass funding to subgrantees, which are to be responsible for the conducting lead-hazard reduction work. Congress set a top limit of ten percent of the total grant sum for the grantee to perform the function of overall management of the grant program, including passing on funding to sub-grantees. The cost of that function, for the purpose of this grant, is defined as the "administrative cost" of the grant, and is limited to ten percent of the total grant amount. The balance of ninety percent or more of the total grant sum is reserved subgrantees or other direct-performers of leadhazard identification and reduction work. Lead hazard identification and reduction includes, but is not necessarily limited to outreach, training, enrollment, lead paint inspection/risk assessments, interim controls, hazard abatement, clearance documentation, blood lead testing, and public education.

II. Administrative Costs: What They Are Not

For the purposes of this HUD grant program for States and local governments to

provide support for the evaluation and reduction of lead-hazards in low- and moderate-income, private target housing, the term "administrative costs" should not be confused with the terms "general and administrative cost," "indirect costs," "overhead," and "burden rate." These are accounting terms usually represented by a government-accepted standard percentage rate. The percentage rate allocates a fair share of an organization's costs that cannot be attributed to a particular project or department (such as the chief executive's salary or the costs of the organization's headquarters building) to all projects and operating departments (such as the Fire Department, the Police Department, the Community Development Department, the Health Department or this program). Such allocated costs are added to those projects' or departments' direct costs to determine their total costs to the organization.

III. Administrative Costs: What They Are

For the purposes of this HUD grant program, "Administrative Costs" are the grantee's allowable direct costs for the overall management of the grant program plus the allocable indirect costs. The allowable limit of such costs that can be reimbursed under this program is ten (10) percent of the total grant sum. Should the grantee's actual costs for overall management of the grant program exceed ten percent of the total grant sum, those excess costs shall be paid for by the grantee. However, excess costs paid for by the grantee may be shown as part of the requirement for cost-sharing funds to support the grant.

IV. Administrative Costs: Definition

A. General

Administrative costs are the allowable, reasonable, and allocable direct and indirect costs related to the overall management of the HUD grant for lead-hazard reduction activities. Those costs shall be segregated in a separate cost center within the grantee's accounting system, and they are eligible costs for reimbursement as part of the grant, subject to the ten percent limit. Such administrative costs do not include any of the staff and overhead costs directly arising from specific sub-grantee program activities eligible under Section III of this NOFA because those costs are eligible for reimbursement under a separate cost center as a direct part of project activities.

The grantee may elect to serve solely as a conduit to sub-grantees, who will in turn perform the direct program activities eligible under Section III (C) (1) of this NOFA, or the grantee may elect to perform all or a part of the direct program activities in other parts of its own organization, which shall have their own segregated, cost centers for those direct program activities. In either case, not more than 10 percent of the total HUD grant sum may be devoted to administrative costs, and not less than 90% of the total grant sum shall be devoted to direct program activities. The grantee shall take care not to mix or attribute administrative costs to the direct project cost centers.

B. Specific

Reasonable costs for the grantee's overall grant management, coordination, monitoring, and evaluation are eligible administrative costs. Subject to the ten percent limit, such costs include, but are not limited to, necessary expenditures for the following goods, activities and services:

- (1) Salaries, wages, and related costs of the grantee's staff, the staff of affiliated public agencies, or other staff engaged in grantee's overall grant management activities. In charging costs to this category the recipient may either include the entire salary, wages, and related costs allocable to the program for each person whose primary responsibilities (more than 65% of their time) with regard to the grant program involve direct overall grant management assignments, or the pro rata share of the salary, wages, and related costs of each person whose job includes any overall grant management assignments. The grantee may use only one of these two methods during this program. Overall grant management includes the following types of activities:
- (a) Preparing grantee program budgets and schedules, and amendments thereto;
- (b) Developing systems for the selection and award of funding to sub-grantees and other sub-recipients;
- (c) Developing suitable agreements for use with sub-grantees and other sub-recipients to carry out grant activities;
- (d) Developing systems for assuring compliance with program requirements;
- (e) Monitoring sub-grantee and subrecipient activities for progress and compliance with program requirements;
- (f) Preparing presentations, reports, and other documents related to the program for submission to HUD;
- (g) Evaluating program results against stated objectives;
- (h) Providing local officials and citizens with information about the overall grant program; however, a more general education program, helping the public understand the nature of lead hazards, lead hazard reduction, blood-lead screening, and the health consequences of lead poisoning is a direct project support activity);
- (i) Coordinating the resolution of overall grant audit and monitoring findings; and
- (j) Managing or supervising persons whose responsibilities with regard to the program include such assignments as those described in paragraphs (a) through (i).
- (2) Travel costs incurred for official business in carrying out the overall grant management;
- (3) Administrative services performed under third party contracts or agreements, for services directly allocable to grant management such as: legal services, accounting services, and audit services;
- (4) Other costs for goods and services required for and directly related to the overall management of the grant program; and including such goods and services as telephone, postage, rental of equipment, renter's insurance for the program management space, utilities, office supplies, and rental and maintenance (but not purchase) of office space for the program.
- (5) The fair and allocable share of grantee's general costs that are not directly attributable

to specific projects or operating departments such as salaries, office expenses and other related costs for local officials (e.g., mayor and city council members, etc.), and expenses for a city's legal or accounting

department which are not charged back to particular projects or other operating departments. If a grantee has an established burden rate, it should be used; if not, the grantee shall be assigned a negotiated provisional burden rate, subject to final audit.

BILLING CODE 4210-32-P

OMB Approval No. 2539-0015 (exp. 01/31/2006) Healthy Homes and Lead Hazard Programs Worksheets U.S. Department of Housing and Urban Development Office of Healthy Homes and Lead Hazard Control

form HUD-96007 (04/2003)

form HUD-96007 (04/2003)

The information collection requirements contained in thi	s notice of funding availal	bility will be used to rate app	in this notice of funding availability will be used to rate applications, determine eligibility, and establish grant amounts.
For the Healthy Homes and Lead Hazard Programs, the public reporting burden for this collection of information is estimated to average 80 hours per response reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.	public reporting burden f athering and maintaining	for this collection of informat the data needed, and comple	For the Healthy Homes and Lead Hazard Programs, the public reporting burden for this collection of information is estimated to average 80 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.
The information submitted in response to these Notices of Funding Availability for Lead Hazard Control Grant Progr Housing and Urban Development Reform Act of 1989 (Pub.L. 101-235, approved December 15, 1989, 42 U.S.C. 3545).	f Funding Availability for ub.L. 101-235, approved l	· Lead Hazard Control Gran December 15, 1989, 42 U.S.C.	The information submitted in response to these Notices of Funding Availability for Lead Hazard Control Grant Programs is subject to the disclosure requirements of the Department of Housing and Urban Development Reform Act of 1989 (Pub.L. 101-235, approved December 15, 1989, 42 U.S.C. 3545).
	Worksl	Worksheet 1 - Key Personnel	nel
Name and Position Title (please include the organization position titles in addition to those shown)	Percent of Time Proposed for this Grant	Percent of Time to be spent on other LHC HUD grants	Percent of time to be spent on other activities
		Note: These thi	Note: These three columns should total 100%
Overall Project Director			
Day-to-Day Program Manager			

7

	Worksheet 2 - Blood Lead Level (BLL) Information*	BLL) Information*
Blood Lead Level for Name of TARGET AREA(S):	TARGET AREA(S)	
Total Number of Children < 6 Years (72 months) of Age in Target Area:		% of Total Population:
Total Number of Children < 6 Years Tested for Ble	Blood Lead Levels: % of Children < 6	% of Children < 6 years of age Tested:
Blood Lead Level	Number of Children Under 6 Years (72 mo) of Age with following BLL Results	% of Total
< 10 µg/dL		
≥ 10 µg/dL and < 15 µg/dL		
≥ 15 µg/dL and < 20 µg/dL		
≥ 20 µg/dL		
Total Tested		100%
Source and Date of Estimate (Indicate Period Covered)		

*State or Local Health Departments may be good reference sources for obtaining this information

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	Worksheet 2 - Blood Lead Level (BLL) Information*	
Blood Lead Level for: JURISDICTION Name of JURISDICTION:		
Total Number of Children < 6 Years (72 months)	of Age in Target Area:% of Total Population:	
Total Number of Children < 6 Years Tested for Blood Lead Levels:	ood Lead Levels:% of Children < 6 years of age Tested:	
Blood Lead Level	Number of Children Under 6 Years (72 mo) of Age with following BLL Results	% of Total
< 10 µg/dL		
≥ 10 µg/dL and < 15 µg/dL		
≥ 15 µg/dL and < 20 µg/dL		
≥ 20 µg/dL		
Total Tested		100 %
Source and Date of Estimate (Indicate Period Covered)		
*State or Local Health Denartments ma	*State or Local Health Denartments may be good reference sources for obtaining this information	

*State or Local Health Departments may be good reference sources for obtaining this information

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		Wo	rksheet 3 - Housi	Worksheet 3 - Housing Age and Condition
Housing data for:	JURISDICTION WIDE			
Name of JURISDICTION:	da,			
Year Built		Number	% of Total	Condition of Housing Stock
Pre-1940				
1940-1949				
1950-1959				
6961-0961				
1970-1977				
1978 or newer				
Total				
Source and Date of Estimate				

form HUD-96007 (04/2003)

9

	Works	heet	Worksheet 4 - Very Low- and Low-Income Population	ıl-wc	ncome Populatio	u
Very Low- and Low Income Population for:		J RIS	JURISDICTION WIDE			
Name of JURISDICTION:				I		
Jurisdiction (City, County, State)	Number of Families <50% of AMI*	%	Number of Families >50% - < 80% of AMI*	%	Total Number of Families <80% of AMI*	%
Total						
Source and Date of Estimate:						
*AMI – Area Median Income						
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	Work	shee	Worksheet 4 - Very Low- and Low-Income Population	ow-l	ncome Populatio	u
Very Low- and Low Income Population for:	ulation for:		TARGET AREA(S)			
Name of TARGET AREA(S):				**************************************	ı	
Target Area	Number of	%	Number of	%	Total Number of	. %
(County, Municipality,	Families		Families >50% - < 80% of AMI*		Families	
or Area)						
			٠			
Total						
Source and Date of Estimate:						
* A M I A soo Modion Income						

*AMI - Area Median Income

	Worksheet 5 - Housing	Worksheet 5 - Housing Occupancy Projections
Type of Unit	Number of Units Proposed	% of Total
Owner-Occupied		
Rental		
Vacant		
Total		100 %

form HUD-96007 (04/2003)

9

form HUD-96007 (04/2003)

	Worksheet 6	- Anticipated	Worksheet 6 - Anticipated Lead Hazard Control Activities	l Activities
Activity	Who Will Perform This Activity? Identify	Number of Units	Estimated Time to	Estimated Unit Cost
	(In-house, contractor, grassroots faith-based or community-based non-profit organization, etc.)		for each unit (hours, days, weeks)	
Lead-Based Paint Inspections				
Lead-Based Paint Risk				
Assessments				
Interim Controls				
Low Level Interventions,				
Specialized				
Paint				
Stabilization)				
Hazard				
Abatement				
Clearance				
Inspections				

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ding	Value of In-kind or Cash Matching Contribution			Total Match Amount \$
Worksheet 7 - Match Funding	Work to be accomplished in support of the program using the matching funds			
	Source of Match			

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	Resource and Match Commitment (\$ Value for Services Provided)			
Worksheet 8 - Grant Partners	Proposed Activities To Be Conducted by Partner			
Works	Description of Commitment			-
	Type of Organization or Program			, N. W.
	Partner Name			N. IN G

Partner Name: Name of organization or entity that will partner with applicant in conducting LHC activities.

Type of Organization or Program: Health, Housing, Environmental, Community Development Department, Grassroots faith-Based or Community-Based Organization, Childhood Lead Poisoning Prevention Program, Financial Institutions, Job Training and Economic Opportunity Organizations, etc.

Description of Commitment: Memorandum of Understanding/Agreement, Contract, Sub-grant, Letter, etc.

Proposed Activities to be Conducted by Partner: The type of activities that will be conducted by the grant partner in support of LHC efforts (i.e. rehabilitation, testing, training,

education and outreach, specification writing, relocation, etc.)

Resource and Match Commitment Contributed by Partner: The value of any contributed resource by the grant partner (includes in-kind or cash in support of the grant

program). The contributed resource should also be listed in Table 7 - Match Funding.